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**2017 EMBRYO TRANSFER CONTRACT**

This service agreement between In Foal, Inc, (IF) and \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

will begin \_\_\_\_\_\_\_\_\_, 2017 and will terminate at the end of that calendar year. In Foal, Inc will be referred to as IF and \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ will be referred to as Embryo Owner for purposes of this agreement.

**Mare\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Breed \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Age \_\_\_\_\_\_\_\_\_\_\_\_\_**

**Insurance Agent or contact #\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Stallion(s) 1. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ 2. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_3. \_\_\_\_\_\_\_\_\_\_\_\_\_\_**

***FEES FOR MARES AT OUR CLINIC***

 **\*BREEDING FEES:**

 **\*\*Cooled semen cycle fee $500**

 **\*\* Frozen semen cycle fee $700**

 **COLLECTION FEE $450**

 **RECIPIENT AVAILABILITY & TRANSFER FEE $500**

 **(due day of transfer)**

 **PREGNANCY FEE (due at first pregnancy check) $1500**

 **PREGNANCY CONFIRMATION FEE (due at 45 days) $1500**

 **RECP MARE BOARD AND PROGESTERONE (33 days) $561**

 **RECIPIENT MARE DEPOSIT (property of In Foal) $1500**

 **\_\_\_\_**

 **6711 Minus recip deposit when mare returned -1500 *FEE FOR MARES AT OUR CLINIC* $5211**

**Guaranteed 45 day pregnant recipient mare – if pregnancy is lost before 45 days, pregnancy fee will be refunded**

***FEES FOR EMBRYOS SHIPPED TO US***

 **COURIER FEE FROM AIRPORT (does not apply for FEDEX) $250**

 **EQUITAINER RETURN $ 45**

 **RECIPIENT AVAILABILITY & TRANSFER FEE $500**

 **(due day of transfer)**

 **PREGNANCY FEE (due at first pregnancy check) $1500**

 **PREGNANCY CONFIRMATION FEE (due at 45 days) $1500**

 **RECIPIENT MARE BOARD AND PROGESTERONE (33 days) $561**

 **RECIPIENT MARE DEPOSIT (property of In Foal) $1500**

 **$5856**

 **MINUS RECIPIENT MARE DEPOSIT WHEN RETURNED -1500**

 ***FEE FOR EMBRYOS SHIPPED TO US* $4356**

**45 day pregnant recipient mare guaranteed, if the pregnancy is lost after the first pregnancy exam, the pregnancy fee will be refunded.**

 **A credit card authorization form will be on file with our office, which will allow IF to charge these payments to the mare owners credit card. All overdue accounts will be charged 1 ½ % interest per month. A late fee of $250.00 per month will be assessed on all accounts delinquent over 60 days.**

**Information (photos) of embryos may be used on InFoalinc.com website. Would you like your information to be Public (for others to see)\_\_\_ or Private (password protected)\_\_\_? PLEASE CHECK ONE.**

\*INCLUDES Transrectal palpation/ultrasonography, inseminations, oxytocin and

 ovulatory agents (hCG or deslorelin)

**Not** included: Sedation, antibiotics, Prostaglandins, lavage, other uterine therapies

**\*\*** A cycle fee will be charged for each cycle, whether an embryo is recovered or not.

**\*\*Recipient mares are the property of In Foal, Inc. Failure to return the mare at all, in poor condition or in a timely manner will result in the loss of the $1500 recipient mare deposit.**

\*\* Deposit will be returned **only** if recipient mare is in good health and reproductively sound.

Board and progesterone on recip mare **after** 45 days will be $15.00 for board and $5.00 for progesterone.

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**Drop off/Pick up times for horses are Monday- Friday: 8am-6pm and Saturday-Sunday: 8am to 4pm. There will be a fee of $100.00 for any horses dropped off/picked up prior to 8am or after 6pm Monday- Friday and prior to 8am or after 4pm on Saturday-Sunday. No Exceptions.**

Mare/Embryo owner hereby releases and shall indemnify and hold IF harmless from any claim for any disease, injury or death to the owner, owners family, employees, property, donor mare, pregnant recipient mare and/or in utero fetus arising from any undertaking by IF under the terms of this provision.

**Mare Owner** (print) **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_**

**Mare Owner** (signature) **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ City \_\_\_\_\_\_\_\_\_\_\_\_\_St \_\_\_\_\_\_\_\_ Zip \_\_\_\_\_**

**Phone \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Cell \_\_\_\_\_\_\_\_\_\_\_\_ Email \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**In Foal Inc. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**